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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Cameron First name  A. Middle name		Shante First name  M. Middle name
	Bring your picture	Shearer		Shearer
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names and any assumed, trade names and doing business as names.			
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5946		xxx-xx-2570

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Debtor 1 Cameron A. Shearer
Debtor 2 Shante M. Shearer

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Your Employer Identification Number (EIN), if any.				
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		107 Rutgers Road Piscataway, NJ 08854			
		Number, Street, City, State & ZIP Code  Middlesex	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Debtor 2 Cameron A. Shearer Shante M. Shearer					Case number (if known)				
Par	t 2: Te	ell the Court About \	our Ban	kruptcy C	ase				
7.	Bankru	The chapter of the Bankruptcy Code you are			brief description of each, see , go to the top of page 1 and o			342(b) for Individuals Filing	g for Bankruptcy
	choosi	choosing to file under	■ Cha	pter 7					
			☐ Cha	pter 11					
			☐ Cha	pter 12					
			☐ Cha	pter 13					
8.	How yo	ou will pay the fee	al or a	bout how yourder. If your pre-printed pared to p	y the fee in installments. If y	are paying the fe ayment on your you choose this	ee yourself, you m behalf, your attor	nay pay with cash, cashier ney may pay with a credit	's check, or money card or check with
			□ I i	request that ut is not rec pplies to yo	ee in Installments (Official For at my fee be waived (You ma quired to, waive your fee, and our family size and you are una on to Have the Chapter 7 Filin	ay request this omay do so only able to pay the f	if your income is fee in installments	less than 150% of the offices). If you choose this option	cial poverty line that n, you must fill out
9.	Have you filed for		■ No.						
		bankruptcy within the last 8 years?	☐ Yes.						
				District		When		Case number	
				District		When		Case number	
				District		When		Case number	
10.	cases   filed by not filin you, or	y bankruptcy pending or being a spouse who is ng this case with by a business r, or by an	■ No □ Yes.						
				Debtor				Relationship to you	
				District		When		Case number, if known	
				Debtor				Relationship to you	
				District		When		Case number, if known	
11.		rent your	□ No.	Go to	line 12.				
	resider	ice /	Yes.	Has y	our landlord obtained an evict	ion judgment aç	gainst you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	t About an Evic	tion Judgment Ag	ainst You (Form 101A) an	nd file it with this

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	otor 2 Cameron A. Shea Shante M. Sheare				Case number (if known)
Par	t 3: Report About Any Bu	usinesses	You Owr	າ as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, State	e & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate bo:	x to describe your business:
	,				ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				•	efined in 11 U.S.C. § 101(53A))
				•	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	proceed you are	under Su choosing to v stateme )(B). I am i	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. tter 11.  11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?				
					Number, Street, City, State & Zip Code

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Debtor 1	Cameron A. Shearer		
Debtor 2	Shante M. Shearer	Case number (if known)	

Part 5: Explain Your Efforts

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 23-10103-KCF Doc 1 Filed 01/05/23 Entered 01/05/23 15:17:29 Desc Main Document Page 6 of 66

	tor 1 Cameron A. Shear tor 2 Shante M. Sheare				Case nu	umber (if known)		
Par	6: Answer These Quest	tions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe t	that are not consum	er debts or bu	siness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. C	Go to line 18.				
aft pre	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do y are paid that funds will be availated				administrative expenses	
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b></b> 25,001-50,0	00	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	_	☐ 50,001-100,		
		□ 100-1 □ 200-9		□ 10,001-25,000	0	☐ More than10	00,000	
19.	How much do you	<b>\$</b> 0 - \$	S50.000	□ \$1,000,001 - 3	\$10 million	□ \$500,000,00	11 - \$1 billion	
	estimate your assets to be worth?	□ \$50,0	001 - \$100,000	\$10,000,001			001 - \$10 billion	
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - □ \$100,000,001			1,001 - \$50 billion 50 billion	
20.	How much do you	□ \$0 - \$	650,000	<b>□</b> \$1,000,001 - :	\$10 million	□ \$500,000,00	11 - \$1 billion	
	estimate your liabilities to be?	+ /	001 - \$100,000	\$10,000,001	•	_ ` ' '	001 - \$10 billion	
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - □ \$100,000,001			0,001 - \$50 billion 550 billion	
Pari	7: Sign Below							
	you	I have ex	xamined this petition, and I declare	under penalty of pe	eriury that the i	information provided is true	and correct.	
	,	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134 and 3571.						
			neron A. Shearer on A. Shearer		/s/ Shante N Shante M. S			
			e of Debtor 1		Signature of D			
		Executed	d on <b>January 5, 2023</b>		Executed on	January 5, 2023		
			MM / DD / YYYY			MM / DD / YYYY		

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Debtor 1 Cameron A. Sheare Shante M. Sheare		Cas	Case number (if known)					
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter					
If you are not represented by an attorney, you do not need to file this page.		debtor(s) the notice required by 11 U.S.C. § 342(b) vledge after an inquiry that the information in the						
	/s/ Michael P. Otto	Date	January 5, 2023					
	Signature of Attorney for Debtor		MM / DD / YYYY					
	Michael P. Otto							
	Printed name							
	Law Office of Michael P. Otto, LLC							
	Firm name							
	1030 Stelton Road							
	Suite 102							
	Piscataway, NJ 08854							
	Number, Street, City, State & ZIP Code							
	Contact phone <b>732-819-7000</b>	Email address	motto@ottolawoffice.com					
	037241994 NJ							
	Bar number & State							

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		i ago o oi oo		
nation to identify your	case:			
Cameron A. Shea	rer			
First Name	Middle Name	Last Name		
Shante M. Sheare	r			
First Name	Middle Name	Last Name		
nkruptcy Court for the:	DISTRICT OF NEW JEE	RSEY		
				☐ Check if this is an amended filing
	Cameron A. Shea First Name Shante M. Sheare First Name	Shante M. Shearer First Name Middle Name	Cameron A. Shearer  First Name Middle Name Last Name  Shante M. Shearer  First Name Middle Name Last Name	Cameron A. Shearer  First Name Middle Name Last Name  Shante M. Shearer  First Name Middle Name Last Name

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	38,362.51
	1c. Copy line 63, Total of all property on Schedule A/B	\$	38,362.51
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,117.78
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	322,117.42
	Your total liabilities	\$	336,235.20
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,825.68
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,780.64
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and su	ubmit this form to
Off	icial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information	ŗ	page 1 of 2

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Deptor 1	Cameron A. Shearer		
Debtor 2	Shante M. Shearer	Case number (if known)	
	the court with your other schedules.		

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\_7,244.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	194,321.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	194,321.00

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			Document	Page 10 of 66		
Fill in	this info	rmation to identify your	case and this filing:			
Debto	r 1	Compren A She				
Debic	)I I	Cameron A. She	Middle Name	Last Name		
Debto	or 2	Shante M. Shear	er			
	e, if filing)	First Name	Middle Name	Last Name		
Unite	d States E	Sankruptcy Court for the:	DISTRICT OF NEW JERSEY			
_						
Case	number			_		☐ Check if this is an
						amended filing
Offi	cial F	orm 106A/B				
_			<b>-</b>			
<u>SCI</u>	neau	le A/B: Prop	perty			12/15
			pe items. List an asset only once. If			
			ate as possible. If two married peop a a separate sheet to this form. On t			
	r every qu		. а соранию спост с ппс толин сп	top or any additional pag	,00, ,0	
Don't 4	Danasila	- Fack Davidson - Daildin		Herre Interest In		
Part 1	Describ	e Each Residence, Buildin	g, Land, or Other Real Estate You O	wn or have an interest in		
1. <b>Do</b> y	ou own o	r have any legal or equitabl	e interest in any residence, building	g, land, or similar property?		
<b>I</b>	No. Go to P	art 2.				
	es. Where	e is the property?				
Part 2	Describ	e Your Vehicles				
Do vo	u own lo	aca ar haya lagal ar ag	uitable interest in any vehicles	whather they are registy	arad ar nat2 Include any ve	shiolog you own that
			uitable interest in any vehicles, ele, also report it on Schedule G: l			enicies you own that
3011100	,,,o 0,00 a	iivoo. ii you loudo a voille	no, also roport it ori corrodare C. I	-xoodiory contracte and c	moxpirod Loddoo.	
3. <b>Ca</b> ı	rs, vans,	trucks, tractors, sport u	tility vehicles, motorcycles			
□ 1	ulo.					
_						
	⁄es					
3.1	Make:	Hyundai	Who has an interest in t	he property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	Tuscon	☐ Debtor 1 only		Creditors Who Have Clair	
	Year:	2022	☐ Debtor 2 only		Current value of the	Current value of the
	Approxim	ate mileage:	Debtor 1 and Debtor 2	2 only	entire property?	portion you own?
	Other info	ormation:	☐ At least one of the deb	•		
	Leased	Vehicle				
			☐ Check if this is comm	nunity property	\$0.00	\$0.00
			(see instructions)			
3.2	Make:	Volkswagen	Who has an interest in t	he property? Check one	Do not deduct secured cla	•
	Model:	Passat 1.8T S Sedai			the amount of any secure Creditors Who Have Clair	
	Year:	2017	■ Debtor 2 only			, , ,
			Debtor 2 only  Debtor 1 and Debtor 2	) only	Current value of the entire property?	Current value of the portion you own?
	Other info		At least one of the deb		chare property:	portion you own:
1	Juioi iillo	maion.	At least one of the dec	nois and another		
			☐ Check if this is comm	nunity property	\$9,414.00	\$9,414.00
			(see instructions)		· .	

Doc 1 Case 23-10103-KCF Filed 01/05/23 Entered 01/05/23 15:17:29 Desc Main Page 11 of 66 Document Debtor 1 Cameron A. Shearer Debtor 2 Shante M. Shearer Case number (if known) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$9,414.00 .pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$5.000.00 Assorted household goods and furnishings 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Assorted electronics \$1,500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No

### 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

Yes. Describe.....

Yes. Describe.....

Assorted clothing

\$1,250.00

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Debtor 1 Debtor 2	Shante M. S			Case number (if known	)
		Assor	ted Jewelry		\$3,000.00
Exam ■ No	arm animals apples: Dogs, cats,	birds, hoi	ses		
■ No	•		•	not already list, including any health aids you did not list	
⊔ Yes	. Give specific inf	formation.			
				art 3, including any entries for pages you have attached	\$10,750.00
Part 4: D	escribe Your Finan	icial Asset	s		
Do you o	wn or have any l	egal or e	quitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No			our wallet, in your ho	me, in a safe deposit box, and on hand when you file your peti	tion
				unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
				Institution name:	
		17.1.	Checking & Savings	Bank of America	\$1,727.00
		17.2.	Checking	Wells Fargo	\$300.00
		17.3.	Savings	Navy FCU	\$0.00
		17.4.	Checking & Savings	USAA Federal Savings Bank	\$3.00
		17.5.	Checking	JPMorgan Chase Bank, NA	\$1.17
		17.6.	Share	Pen FCU	\$15.00
			ely traded stocks ent accounts with bro	kerage firms, money market accounts	

☐ Yes...... Institution or issuer name:

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Debtor :		eron A. Shearer te M. Shearer		Case number (if known)	
	nt venture	raded stock and interests in incorp	porated and unincorporate	d businesses, including an interest in an LLC, partners	ship, and
	_	ecific information about them Name of entity:		% of ownership:	
Neg Noi ■ Ne	gotiable inst n-negotiable o	and corporate bonds and other neg truments include personal checks, ca e instruments are those you cannot to ecific information about them Issuer name:	shiers' checks, promissory r	notes, and money orders.	
	amples: Inte	pension accounts	403(b), thrift savings accour	nts, or other pension or profit-sharing plans	
	-	n account separately. Type of account:	Institution name:		
		IRA	Fidelity		\$11.50
		Pension	NJDPB	\$13	3,966.73
		Deferred Compensat	ion Prudential	\$1	1,775.11
□ No ■ Ye	o es		Institution name or i	ndividual:	
		Rent	Pleasant View G	ardens Apt., LLC	\$399.00
23. <b>Ann</b> ■ No	`	ontract for a periodic payment of mor	ney to you, either for life or fo	r a number of years)	
24. <b>Inter</b>		Issuer name and description.  education IRA, in an account in a 0(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, o	r under a qualified state tuition program.	
■ No	o es	Institution name and description	on. Separately file the record	s of any interests.11 U.S.C. § 521(c):	
■ No	0		other than anything listed	in line 1), and rights or powers exercisable for your be	nefit
		ecific information about them  ights, trademarks, trade secrets, a	and other intellectual prope	artv	
Exa ■ No	a <i>mples:</i> Inte o	rnet domain names, websites, proce			
	·	ecific information about them chises, and other general intangib	les		
Exa ■ No	a <i>mples:</i> Buil o	ding permits, exclusive licenses, coo		s, liquor licenses, professional licenses	
		ecific information about them		•	a£ 41: -
Money	or property	y owed to you?		Current value of portion you ow Do not deduct s	vn?

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Debtor 2	Cameron A. Shearer Shante M. Shearer	Case number (if known)	
			claims or exemptions.
20 <b>Tay r</b> a	stunds awad to you		·
Zo. Tax re ■ No	funds owed to you		
	. Give specific information about them, including whether you already	filed the returns and the tax years	
		,	
29. <b>Famil</b> y	v support		
	<b>y support</b> <i>iple</i> s: Past due or lump sum alimony, spousal support, child support, i	maintenance, divorce settlement, property	settlement
■ No			
☐ Yes	. Give specific information		
	amounts someone owes you		antina Canial Canadita
Exam	ples: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else	s, sick pay, vacation pay, workers comper	isation, Social Security
■ No			
☐ Yes	. Give specific information		
31. Intere	sts in insurance policies		
Exam	oples: Health, disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insuran	ce
■ No			
☐ Yes	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund
	Company hand.	Beneficiary.	value:
If you	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insuratione has died.	ance policy, or are currently entitled to rece	ive property because
■ No	one has died.		
	. Give specific information		
	·		
Exam	s against third parties, whether or not you have filed a lawsuit or aples: Accidents, employment disputes, insurance claims, or rights to		
■ No			
⊔ Yes	. Describe each claim		
34. Other	contingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to	set off claims
■ No			
⊔ Yes	. Describe each claim		
35. <b>Any fi</b>	nancial assets you did not already list		
■ No			
☐ Yes	. Give specific information		
36 <b>A</b> dd	the dollar value of all of your entries from Part 4, including any	entries for nages you have attached	
	Part 4. Write that number here		\$18,198.51
		L	
Part 5: Do	escribe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
37. <b>Do you</b>	own or have any legal or equitable interest in any business-related prope	erty?	
No. G	o to Part 6.		
☐ Yes.	Go to line 38.		
Part 6: Do	escribe Any Farm- and Commercial Fishing-Related Property You Own or	Have an Interest In.	
	you own or have an interest in farmland, list it in Part 1.		
46. <b>Do vo</b>	u own or have any legal or equitable interest in any farm- or com	nmercial fishing-related property?	
	. Go to Part 7.	g	
	s. Go to line 47.		

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1 Debtor 2	Cameron A. Shearer Shante M. Shearer		Case number (if known)	
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exam ■ No	u have other property of any kind you did not already list?  ples: Season tickets, country club membership  Give specific information			
54. <b>Add</b>	the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8: 55. Part	List the Totals of Each Part of this Form  1: Total real estate, line 2			\$0.00
	2: Total vehicles, line 5	\$9,414.00		φυ.υυ_
	3: Total personal and household items, line 15	\$10,750.00		
58. <b>Part</b>	4: Total financial assets, line 36	\$18,198.51		
59. <b>Part</b>	5: Total business-related property, line 45	\$0.00		
60. <b>Part</b>	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part</b>	7: Total other property not listed, line 54 +	\$0.00		
62. <b>Tota</b>	I personal property. Add lines 56 through 61	\$38,362.51	Copy personal property to	stal <b>\$38,362.51</b>
63. Tota	I of all property on Schedule A/B. Add line 55 + line 62			\$38,362.51

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this inform	nation to identify your	case:		
Debtor 1	Cameron A. Shea	irer		
	First Name	Middle Name	Last Name	
Debtor 2	Shante M. Sheare	er		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JER	RSEY	
Case number				☐ Check if this is an
				amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Pro	perty You Claim as Exemp
--------------------------	--------------------------

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	Assorted household goods and furnishings	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)					
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	Assorted electronics Line from Schedule A/B: 7.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)					
	Elle Holli Gelledale PAB. P.1			100% of fair market value, up to any applicable statutory limit						
	Assorted clothing Line from Schedule A/B: 11.1	\$1,250.00		\$1,250.00	11 U.S.C. § 522(d)(3)					
	Line non schedule A/B. TTT			100% of fair market value, up to any applicable statutory limit						
	Assorted Jewelry Line from Schedule A/B: 12.1	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(4)					
	Line Holli Geriedale PAB. 12.1			100% of fair market value, up to any applicable statutory limit	•					
	Checking & Savings: Bank of America	\$1,727.00		\$1,727.00	11 U.S.C. § 522(d)(5)					
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit						

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Debtor	Shante M. Shearer			Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	hecking: Wells Fargo ne from Schedule A/B: 17.2	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	avings: Navy FCU ne from Schedule A/B: 17.3	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	hecking & Savings: USAA Federal avings Bank	\$3.00		\$3.00	11 U.S.C. § 522(d)(5)
	ne from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
C N	hecking: JPMorgan Chase Bank, A	\$1.17		\$1.17	11 U.S.C. § 522(d)(5)
	ne from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
	hare: Pen FCU ne from Schedule A/B: 17.6	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)
	The Hellin Gestional Property of the Helling States of the Helling			100% of fair market value, up to any applicable statutory limit	
	RA: Fidelity ne from Schedule A/B: 21.1	\$11.50		\$11.50	11 U.S.C. § 522(d)(12)
	no nom osmodalo 702. = 11 :			100% of fair market value, up to any applicable statutory limit	
_	ension: NJDPB ne from Schedule A/B: 21.2	\$13,966.73		\$13,966.73	11 U.S.C. § 522(d)(10)(E)
				100% of fair market value, up to any applicable statutory limit	
	eferred Compensation: Prudential ne from Schedule A/B: 21.3	\$1,775.11		\$1,775.11	11 U.S.C. § 522(d)(10)(E)
	no nom osmodalo 702. 2 m			100% of fair market value, up to any applicable statutory limit	
	ent: Pleasant View Gardens Apt., LC	\$399.00		\$399.00	11 U.S.C. § 522(d)(5)
	ne from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption Subject to adjustment on 4/01/25 and every No			led on or after the date of adjustmen	ıt.)
_	Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case?	?
	□ No □ Yes				

Debtor 1 Cameron A. Shearer

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			Document F	age 18	of 66		
Filli	in this informat	tion to identify you	r case:				
Deb	tor 1	Cameron A. She	earer				
	=	First Name		ast Name			
Deb	tor 2	Shante M. Shea	rer				
(Spot	use if, filing)	First Name	Middle Name L	ast Name			
Unit	ed States Bankr	ruptcy Court for the:	DISTRICT OF NEW JERSEY				
Cas (if kno	e number					_	if this is an ded filing
Offi	icial Form	106D					
			Who Have Claims So	ecured	by Propert	У	12/15
numk 1. Do	per (if known). any creditors ha No. Check th Yes. Fill in al	ve claims secured by	his form to the court with your other so				me and case
		ime If a creditor has r	more than one secured claim, list the credite	or congrately	Column A	Column B	Column C
for e	ach claim. If more	than one creditor has	a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Hyundai Mo	tor Finance	Describe the property that secures the	claim:	\$0.00	\$0.00	\$0.00
	Creditor's Name		2022 Hyundai Tuscon 15588 m Leased Vehicle	niles			
	PO Box 660 Dallas, TX 7		As of the date you file, the claim is: Che apply.  Contingent	eck all that			
	Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated				
Who	o owes the debt	? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
	ebtor 1 only		An agreement you made (such as mo	rtgage or secu	red		
	ebtor 2 only		car loan)				
	Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
	at least one of the	debtors and another	☐ Judgment lien from a lawsuit				

☐ Check if this claim relates to a

community debt Date debt was incurred Other (including a right to offset)

Last 4 digits of account number 4039

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Debtor 1	Cameron A. S	Shearer				Case number (if known)			
	First Name	Middle Na	me	Last Name	<del></del>				
Debtor 2	Shante M. Sh	earer							
	First Name	Middle Na	me	Last Name					
No	www.Eodorol.Cro	4:4							
ソフト	vy Federal Credion	uit	Describe the pro	perty that secures	the claim:	\$14,117.78	\$9,4	414.00	\$4,703.78
	ditor's Name		· · · · · · · · · · · · · · · · · · ·	agen Passat 1.					·
	OB 3100 errifield, VA 221	19-3100	As of the date yo apply.	ou file, the claim is	: Check all that	J			
Nun	nber, Street, City, State &	& Zip Code	☐ Unliquidated						
Who ow	es the debt? Check	cone.	Disputed Nature of lien. C	Check all that apply.					
☐ Debto☐ Debto			An agreement car loan)	you made (such as	mortgage or	secured			
■ Debto	r 1 and Debtor 2 only	,	☐ Statutory lien (	such as tax lien, me	echanic's lien)	)			
☐ At leas	st one of the debtors	and another	☐ Judgment lien	from a lawsuit					
	c if this claim relate munity debt	s to a	Other (including	ng a right to offset)	Purchas	e Money Security			
Date deb	t was incurred		Last 4 dig	its of account nun	nber <u>601</u>	1			
If this is	e dollar value of you s the last page of you nat number here:		•	-		\$14,1 \$14,1			

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document F	Page 20 of 66	_
Fill in this infor	mation to identify your ca	se:		
Debtor 1	Cameron A. Sheare	ar .		
202101 1	First Name		Last Name	
Debtor 2	Shante M. Shearer			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Forr	m 106E/F			
		o Have Unsecured C	laims	12/15
				NPRIORITY claims. List the other party to
Schedule D: Creditelleft. Attach the Conname and case nu	tors Who Have Claims Secur ntinuation Page to this page. mber (if known).	ed by Property. If more space is need If you have no information to repor	not include any creditors with partially eded, copy the Part you need, fill it out, rt in a Part, do not file that Part. On the t	number the entries in the boxes on the
	All of Your PRIORITY Uns			
_ ′	ors have priority unsecured	claims against you?		
No. Go to F	Part 2.			
☐ Yes.				
Part 2: List A	All of Your NONPRIORITY	Unsecured Claims		
	ors have nonpriority unsecu			
_ `		. Submit this form to the court with you	ur other schedules	
	ave nothing to report in this par	. Odbinit tills form to the court with you	ui other soriedules.	
Yes.				
unsecured clai	im, list the creditor separately f	or each claim. For each claim listed, id	creditor who holds each claim. If a credit dentify what type of claim it is. Do not list cl we more than three nonpriority unsecured of	laims already included in Part 1. If more
2.				Total claim
4.1 Affirm		Last 4 digits of accou	nt number	\$2,322.59
•	ty Creditor's Name			
	ella Street, FIr 4 Irgh, PA 15212	When was the debt in	curred?	
	Street City State Zip Code	As of the date you file	e, the claim is: Check all that apply	
Who incu	urred the debt? Check one.			
☐ Debto	r 1 only	☐ Contingent		
☐ Debto	r 2 only	☐ Unliquidated		
Debto	r 1 and Debtor 2 only	☐ Disputed		
☐ At leas	st one of the debtors and anoth	er Type of NONPRIORITY	Y unsecured claim:	
☐ Check	k if this claim is for a commu	nity Student loans		
debt			out of a separation agreement or divorce the	hat you did not
	im subject to offset?	report as priority claims		, to
■ No		•	profit-sharing plans, and other similar deb	DIS
☐ Yes		Other, Specify Pe	ersonal loan	

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	Cameron A. Shearer Shante M. Shearer	Case number (if known)	
	Afterpay US, Inc.	Last 4 digits of account number 8035	\$365.44
	Nonpriority Creditor's Name POB 328	When was the debt incurred?	
_	San Francisco, CA 94104  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Revolving Credit	
	AM/PM Urgent & Primary Care Nonpriority Creditor's Name	Last 4 digits of account number 8779	\$350.00
	Nonpriority Creditor's Name 19 S. Washington Ave. Bergenfield, NJ 07621	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
	American Eagle	Last 4 digits of account number	\$1,413.31
	Nonpriority Creditor's Name POB 530942 Atlanta, GA 30353	When was the debt incurred?	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	

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	r 1 Cameron A. Shearer Shante M. Shearer	Case number (if known)		
4.5	American Express	Multiple	\$13,935.17	
4.5	Nonpriority Creditor's Name POB 297871	Last 4 digits of account number accounts  When was the debt incurred?	ψ13, <del>9</del> 33.17	
	Fort Lauderdale, FL 33329  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	<ul><li>■ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	☐ Disputed  Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit card purchases		
4.6	Apple Card - GS Bank USA Nonpriority Creditor's Name	Last 4 digits of account number	\$8,788.17	
	POB 7247 Lockbox 6112	When was the debt incurred?		
	Philadelphia, PA 19170			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify		
4.7	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number 5957	\$2,362.34	
	POB 15284 Wilmington, DE 19850	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Credit card purchases		

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Debtor Debtor	Cameron A. Shearer Shante M. Shearer		Case number (if known)	
4.8	Capital One	Last 4 digits of account number	Multiple accounts	\$1,211.29
	Nonpriority Creditor's Name POB 30285	When was the debt incurred?		·,
	Salt Lake City, UT 84130  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit card		
		· ,		
4.9	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number	Multiple accounts	\$8,693.00
	POB 183003 Columbus, OH 43218	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	$\square$ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.1	Core, Spine & Wellness Nonpriority Creditor's Name	Last 4 digits of account number		\$700.00
	180 Tices Lane, Ste 105 East Brunswick, NJ 08816	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	5,,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Medical		

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	or 1 Cameron A. Shearer Shante M. Shearer	Case number (if known)	
4.1 1	Credit Acceptance Corp.	Last 4 digits of account number	\$1,880.00
	Nonpriority Creditor's Name POB 513	When was the debt incurred?	
	Southfield, MI 48037	- As file has a file deviate to the second	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	_ ,	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Auto Loan cosignor	
4.1 2	Credit One Bank	Last 4 digits of account number	\$795.00
	Nonpriority Creditor's Name POB 98875	When was the debt incurred?	
	Las Vegas, NV 89193  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	<u> </u>	Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Account	
4.1 3	Cross River Bank	Last 4 digits of account number 8J94	\$2,270.00
	Nonpriority Creditor's Name 268 Bush Street, #4411 San Francisco, CA 94104	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Loan	

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	1 Cameron A. Shearer 2 Shante M. Shearer		Case number (if known)	
4.1	Dept. of Education/Nelnet	Logi d digito of account number	Multiple	\$33,508.00
4	Nonpriority Creditor's Name 121 S 13th Street	Last 4 digits of account number When was the debt incurred?	accounts	ψ33,300.00
	Lincoln, NE 68508  Number Street City State Zip Code	As of the date you file, the claim i	is. Chock all that apply	
	Who incurred the debt? Check one.		<b>в.</b> Опеск ан that арргу	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Student Lo	ans	
4.1 5	Discover	Last 4 digits of account number		\$6,704.00
	Nonpriority Creditor's Name POB 30939 Salt Lake City, UT 84130	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.1	Dr. Mahmud Ibrahim	Last 4 digits of account number		\$6,000.00
0	Nonpriority Creditor's Name 555 NJ 18	When was the debt incurred?		
	East Brunswick, NJ 08816		in Charle all that apply	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	u Claiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes		<b>.</b>	
	<b>—</b> 163	Other. Specify Medical		

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	1 Cameron A. Shearer 2 Shante M. Shearer	Case number (if known)	
4.1 7	Envision Physician Services	Last 4 digits of account number 4700	\$70.44
	Nonpriority Creditor's Name POB 8710	When was the debt incurred?	
	Pompano Beach, FL 33075  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	□ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify Medical	
4.1			
8	Envision Physician Services  Nonpriority Creditor's Name	Last 4 digits of account number 6354	\$79.09
	POB 37794 Philadelphia, PA 19101	When was the debt incurred?	
•	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.1	GEICO	Last 4 digits of account number 2187	\$1,371.31
9	Nonpriority Creditor's Name		
	Attn: Region 8 Policy POB 9506	When was the debt incurred?	
	Fredericksburg, VA 22403  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date yearing, the claim io. oncok an that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Insurance	

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Debt Debt	or 1 Cameron A. Shearer Shante M. Shearer	Case number (if known)	
4.2 0	Kashable, LLC	Last 4 digits of account number	\$2,454.00
	Nonpriority Creditor's Name 489 5th Ave. Floor 18 New York, NY 10017	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal loan	
4.2 1	Kohls	Last 4 digits of account number	\$471.38
	Nonpriority Creditor's Name POB 60043	When was the debt incurred?	
	City of Industry, CA 91716  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.2	LVNV Funding	Last 4 digits of account number 0903	\$795.87
	Nonpriority Creditor's Name POB 1269 Greenville, SC 29602	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Account	

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2 Shante M. Shearer	Case number (if known)	Case number (if known)	
Medemerge	Last 4 digits of account number 8654	\$315.5	
Nonpriority Creditor's Name POB 890 Dunellen, NJ 08812	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community debt	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Medical		
MOHELA/Dept. of Education	Last 4 digits of account number	\$113,799.	
Nonpriority Creditor's Name 633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	· ·	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	☐ Other. Specify		
	Student Loans		
Navient	Multiple Last 4 digits of account number accounts	\$47,014.0	
Nonpriority Creditor's Name			
POB 9635	When was the debt incurred?		
Wilkes Barre, PA 18773-9635  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	■ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	☐ Other. Specify		
	Student Loans		

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	Cameron A. Shearer Shante M. Shearer		Case number (if known)	
4.2	Navy Federal Credit Union	Last 4 digits of account number	Multiple accounts	\$21,443.00
	Nonpriority Creditor's Name 820 Follin Lane SE Vienna, VA 22180	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit card	purchases	
4.2	NJ Urology Nonpriority Creditor's Name	Last 4 digits of account number	0976	\$86.97
	POB 95000 Philadelphia, PA 19195	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	Nordstrom Nonpriority Creditor's Name	Last 4 digits of account number	3638	\$2,526.78
	POB 6555 Englewood, CO 80155	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other Specify Credit card	purchases	

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Debtor Debtor	1 Cameron A. Shearer 2 Shante M. Shearer	Case number (if known)	
4.2 9	Old Navy	Last 4 digits of account number	\$943.86
	Nonpriority Creditor's Name POB 8801	When was the debt incurred?	
	Wilmington, DE 19899	Then was the dest mounted.	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.3 0	One United Bank	Last 4 digits of account number	\$156.00
	Nonpriority Creditor's Name 3683 Crenshaw Blvd Los Angeles, CA 90016	When was the debt incurred?	
•	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.3	Same Day Surgery Center of Cent.		
1	Jersey Nonpriority Creditor's Name	Last 4 digits of account number 3617	\$2,671.62
	225 May Street Unit C	When was the debt incurred?	
	Edison, NJ 08837  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	

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tor 2 Shante M. Shearer		Case number (if known)		
Southern Bar Physicians	nk Emergency	Last 4 digits of account number	Multiple accounts	\$109.21
Nonpriority Credito 366 George S	Street	When was the debt incurred?		
New Brunswi Number Street Cit Who incurred the		As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	acari chicok chic.	☐ Contingent		
Debtor 2 only		☐ Unliquidated		
■ Debtor 1 and □	Nehtor 2 only	☐ Disputed		
_	the debtors and another	Type of NONPRIORITY unsecured	d claim:	
_	claim is for a community	☐ Student loans		
debt	•	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No		☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes		Other. Specify Medical		
St. Peters Un	iversity Hospital	Last 4 digits of account number	0001	\$1,015.80
Nonpriority Credito 254 Easton A	ve.	When was the debt incurred?		
New Brunswi Number Street Cit Who incurred the		As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only		☐ Contingent		
Debtor 2 only		☐ Unliquidated		
■ Debtor 1 and [	Debtor 2 only	☐ Disputed		
☐ At least one of	the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this	claim is for a community	☐ Student loans		
debt Is the claim subj	ect to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes		Other. Specify Medical		
SYNCB/Amaz	con	Last 4 digits of account number		\$789.00
Nonpriority Credito POB 960013		When was the debt incurred?		
Orlando, FL 3  Number Street Cit  Who incurred the		As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only		☐ Contingent		
Debtor 2 only		☐ Unliquidated		
■ Debtor 1 and [	Debtor 2 only	☐ Disputed		
_	the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	claim is for a community	Student loans	ration agreement or divorce that you did not	
Is the claim subj	ect to offset?	report as priority claims	ration agreement of divorce that you did flot	
■ No		Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes		■ Other. Specify Credit card	purchases	
		J Opcomy	-	

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	or 1 Cameron A. Shearer Shante M. Shearer		Case number (if known)		
4.3 5	SYNCB/Care Credit	Last 4 digits of account number		\$410.07	
	Nonpriority Creditor's Name POB 960061	When was the debt incurred?	When was the debt incurred?  As of the date you file, the claim is: Check all that apply		
	Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim is			
	Who incurred the debt? Check one.	•			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims			
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts		
	Yes	Other. Specify Credit card	purchases		
4.3	SYNCB/Paypal Credit	Last 4 digits of account number	Multiple accounts	\$4,094.40	
	Nonpriority Creditor's Name POB 965005	When was the debt incurred?			
	Orlando, FL 32896	mon was the dest meaned.			
	Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	·			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims			
	No	Debts to pension or profit-sharing			
	Yes	■ Other. Specify Credit card purchases			
4.3 7	Ultra Beauty	Last 4 digits of account number	0279	\$409.71	
	Nonpriority Creditor's Name 1000 Remington Blvd, Suite 120 Bolingbrook, IL 60440	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separ	ation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes ☐ Other. Specify Credit card purchases				

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	r 1 Cameron A. Shearer Shante M. Shearer	Case number (if known)			
4.3 8	Unity Visa	Last 4 digits of account number 0437	\$454.04		
	Nonpriority Creditor's Name POB 4521 Carol Stream, IL 60197	When was the debt incurred?			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	$\square$ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes				
4.3 9	University Radiology Group, PC	Multiple Last 4 digits of account number accounts	\$780.00		
	Nonpriority Creditor's Name 483 Cranbury Road East East Brunswick, NJ 08816	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify  Medical			
4.4 0	Upstart Network	Multiple Last 4 digits of account number accounts	\$28,558.00		
	Nonpriority Creditor's Name 2950 S. Delaware Street Suite 3	When was the debt incurred?			
	San Mateo, CA 94403  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes ☐ Other. Specify Personal Ioan				

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 2 Shante M. Shearer		Case number (if known)		
have more than one creditor for any of the do notified for any debts in Parts 1 or 2, do not the		the additional creditors here. If you do not have additional persons to be		
Name and Address	On which entry in Part 1 or Part 2	which entry in Part 1 or Part 2 did you list the original creditor?		
LVNV Funding	Line <b>4.12</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
POB 1269 Greenville, SC 29602		■ Part 2: Creditors with Nonpriority Unsecured Claims		
•	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Pressler, Felt & Warshaw, LLP	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
7 Entin Road Parsippany, NJ 07054		■ Part 2: Creditors with Nonpriority Unsecured Claims		
. а.о.ррану, но отоо.	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?		
Remex Inc	Line 4.39 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
307 Wall Street Princeton, NJ 08540-1515		■ Part 2: Creditors with Nonpriority Unsecured Claims		
•	Last 4 digits of account number			

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					T. ( )   Ol · · ·
	6f.	Student loans	6f.	\$	Total Claim 194,321.00
Total	01.	otadon isans	01.	Ψ	194,321.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	127,796.42
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	322,117.42

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Fill in this infor	mation to identify your	case:	·	
Debtor 1	Cameron A. Shea	irer		
	First Name	Middle Name	Last Name	
Debtor 2	Debtor 2 Shante M. Shearer			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY	
Case number (if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Hyundai Motor Finance PO Box 660891 Dallas, TX 75266 Case 23-10103-KCF Doc 1 Filed 01/05/23 Entered 01/05/23 15:17:29 Desc Main Document Page 36 of 66

		Documer	it Page 36 of 66	)	
Fill in thi	s information to identify y	our case:			
Debtor 1	Cameron A. S	hearer			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	Shante M. She	Middle Name	Last Name		
	ates Bankruptcy Court for th	ne: DISTRICT OF NEW JER	SEY		
Case nur (if known)	nber			☐ Check if the amended	
	al Form 106H dule H: Your Co	odebtors			12/15
people ar fill it out, your nam	e filing together, both are and number the entries in e and case number (if kno byou have any codebtors?	equally responsible for suppl	ying correct information. If the Additional Page to this	mplete and accurate as possible. If tw If more space is needed, copy the Ad is page. On the top of any Additional F codebtor.	ditional Page,
2. W	thin the last 8 years, have	you lived in a community pro ana, Nevada, New Mexico, Pue		Community property states and territories n, and Wisconsin.)	s include
_	o. Go to line 3. es. Did your spouse, former	spouse, or legal equivalent live	with you at the time?		
in lin Forn	e 2 again as a codebtor o	nly if that person is a guarante	or or cosigner. Make sure y	our spouse is filing with you. List the pyou have listed the creditor on Scheouse Schedule D, Schedule E/F, or Sc	dule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State a	and ZIP Code		Column 2: The creditor to whom you of Check all schedules that apply:	owe the debt
3.1	Tiona McNair 25 Maple Ave., Apt. B Irvington, NJ 07111		I ]	□ Schedule D, line ■ Schedule E/F, line4.11 □ Schedule G Credit Acceptance Corp.	

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

							l				
	in this information to identify your of btor 1 Cameron A										
	btor 2 Shante M. S	Shearer									
Uni	ited States Bankruptcy Court for the	e: DISTRICT OF NEW	JERSEY								
	se number nown)		-				□ An		ed filing ent show	ving postpetitions following dat	
0	fficial Form 106I						M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome									12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment Fill in your employment	ur spouse is not filing w On the top of any addit	ith you, do no	t include i	inforn	natio	n about	your spo	ouse. If i	more space i	s needed,
٠.	information.		Debtor 1					Debtor 2	or non	-filing spous	e
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employe</li><li>□ Not employe</li></ul>					■ Emple	•	I	
	employers.	Occupation	Unemploy	•					. ,	e Specialist	<del>i</del>
	Include part-time, seasonal, or self-employed work.	Employer's name	Onemploy	cu						ren & Famil	
	Occupation may include student or homemaker, if it applies.	Employer's address						200 Me Edison			
		How long employed t	here? 1	week				_4	years		
Pai	Give Details About Mo	nthly Income									
	imate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothi	ng to repo	rt for a	any	ine, write	\$0 in the	space.	Include your r	non-filing
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the info	rmation fo	r all e	mplo	yers for t	hat perso	n on the	e lines below.	If you need
							For Deb	tor 1		Debtor 2 or filing spouse	,
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$		0.00	\$	5,607.1	4_
3.	Estimate and list monthly over	time pay.			3.	+\$		0.00	+\$_	0.0	0_
1	Calculate gross Income Add li	ina 2 ± lina 3			4	•		0.00	•	5 607 1 <i>1</i>	

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Deb Deb	tor 1 tor 2	Cameron A. Shearer Shante M. Shearer	-	Case	number ( <i>if known</i> )			
				For	Debtor 1		Debtor 2 or -filing spouse	
	Cop	y line 4 here	4.	\$	0.00	\$	5,607.14	_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	1,339.50	)
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	420.53	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	51.85	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	)
	5e.	Insurance	5e.	\$_	0.00	\$	405.06	<u> </u>
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	_
	5g.	Union dues	5g.	\$_	0.00	\$	64.48	_
	5h.	Other deductions. Specify:	_ 5h.+	\$_	0.00	- \$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	2,281.42	<u>!</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	3,325.72	<u>.                                      </u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$-	0.00	\$—	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.	\$_	2,201.00	\$	0.00	_
	8e.	Social Security	8e.	\$_	0.00	\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	_
	8g.	Pension or retirement income	– 8g.	\$_	0.00	\$	0.00	_
	8h.	Other monthly income. Specify: Part-time job - FedEx	8h.+	\$_	298.96	· —	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,499.96	\$	0.0	0
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,499.96 + \$_	3,3	= \$ _	5,825.68
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•		chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$	5,825.68
13.	Do :	you expect an increase or decrease within the year after you file this form' No.	?				Combi month	ned ly income
		Vec Evolain:						

Fill in this information to identify your case:  Debtor 1  Cameron A. Shearer  Check if this is:  An amended filing  Debtor 2  (Spouse, if filing)  A supplement showing postpetition  13 expenses as of the following dat	
Debtor 2 Shante M. Shearer A supplement showing postpetition	
Debtor 2 Shante M. Shearer A supplement showing postpetition	
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY MM / DD / YYYY	
Case number(If known)	
Official Form 106J	
Schedule J: Your Expenses	12/1
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying coinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and number (if known). Answer every question.	
Part 1: Describe Your Household	
1. Is this a joint case?	
□ No. Go to line 2.	
Yes. Does Debtor 2 live in a separate household?	
<ul><li>■ No</li><li>□ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.</li></ul>	
2. Do you have dependents? □ No	
Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent	
Do not state the dependents names. □ No 2 □ Yes	
□ No Son 14 ■ Yes	
□ No	
3. Do your expenses include expenses of people other than yourself and your dependents?	
Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and applicable date.	report ill in the
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)	
<ol> <li>The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.</li> <li>4. \$ 2,100.00</li> </ol>	_
If not included in line 4:	
4a. Real estate taxes 4a. \$ 0.00	
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00	_
4c. Home maintenance, repair, and upkeep expenses  4c. \$  0.00	_
4d. Homeowner's association or condominium dues  4d. \$  0.00  5. Additional mortgage payments for your residence, such as home equity loans  5. \$  0.00	_

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\$ 50 \$ 50 \$ 50 \$ 50 \$ 1,22 \$ 17 \$ 15 \$ 20 \$ 10 \$ 10 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5	75.00 70.00 00.00 50.00 27.00 75.00 50.00 75.00 50.00 00.00 00.00 38.64 0.00 0.00 0.00
\$ 50 \$ 50 \$ 50 \$ 50 \$ 1,22 \$ 17 \$ 15 \$ 20 \$ 10 \$ 10 \$ 10 \$ 10 \$ 10 \$ 10 \$ 10 \$ 1	70.00 00.00 0.00 50.00 27.00 75.00 50.00 00.00 00.00 0.00 0.00 38.64 0.00
\$ 50 \$ 50 \$ 50 \$ 50 \$ 1,22 \$ 17 \$ 15 \$ 20 \$ 10 \$ 10 \$ 10 \$ 10 \$ 10 \$ 10 \$ 10 \$ 1	70.00 00.00 0.00 50.00 27.00 75.00 50.00 00.00 00.00 0.00 0.00 38.64 0.00
\$ 50 \$ 65 \$ 1,22 \$ 17 \$ 15 \$ 20 \$ 10 \$ 3 \$ 3 \$ 3 \$ 45 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3	00.00 0.00 50.00 27.00 75.00 50.00 75.00 50.00 00.00 0.00 0.00 38.64 0.00
\$ 65 \$ 1,22 \$ 17 \$ 15 \$ 20 \$ 20 \$ 10 \$ \$ 13 \$ \$ 25 \$ 26	0.00 50.00 27.00 75.00 50.00 75.00 50.00 00.00 0.00 0.00 38.64 0.00
\$ 1,22 \$ 1,22 \$ 17 \$ 15 \$ 20 \$ 20 \$ 10 \$ \$ 13 \$ \$ 25 \$ 26	50.00 27.00 75.00 50.00 75.00 50.00 00.00 00.00 0.00 38.64 0.00 0.00
\$ 1,22 \$ 17 \$ 15 \$ 20 \$ 20 \$ 10 \$ \$ 3 \$ 3	27.00 75.00 50.00 75.00 50.00 00.00 00.00 0.00
\$ 17 \$ 15 \$ 20 \$ 20 \$ 10 \$ \$ 3 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5	75.00 50.00 75.00 50.00 00.00 00.00 0.00 38.64 0.00 0.00
\$ 17 \$ 15 \$ 7 \$ 20 \$ 10 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 3 \$ 45 \$ 3 \$ 3 \$ 3 \$ 3 \$ 45 \$ 3 \$ 45 \$ 3 \$ 45 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$ 5 \$	75.00 50.00 75.00 50.00 00.00 00.00 0.00 38.64 0.00 0.00
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\$ 45 \$ 20 \$ 10 \$ 3 \$ 3 \$ 50 \$ 26	75.00 50.00 00.00 00.00 0.00 38.64 0.00
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Ψ	0.00
\$	0.00
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our Income.	
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\$	0.00
\$	0.00
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\$	0.00
+\$	0.00
\$ 6,780.	64
	.04
\$	
\$ 6,780.	.64
\$ 5.82	25.68
•	80.64
	54.96
\$ -95	
\$ -95	
\$ -95 cayment to increase or decrease because	cause of a
form?	cause of a
	\$ 5,82 -\$ 6,76

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Debtor 1	Cameron A. She	arer			
	First Name	Middle Name	Last Name		
Debtor 2	Shante M. Shear	rer			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case number					
(if known)				☐ Check if this amended filir	
You must file thi obtaining mone rears, or both. 1	is form whenever you y or property by fraud 8 U.S.C. §§ 152, 1341,	file bankruptcy schedules in connection with a bank		a false statement, concealing prop o to \$250,000, or imprisonment for	
Sia					
3.9	n Below				
		eone who is NOT an atto	rney to help you fill out bankruptc	y forms?	
		eone who is NOT an atto	ney to help you fill out bankruptc	y forms?	
Did you pa		eone who is NOT an atto	ney to help you fill out bankruptc	y forms?  Attach Bankruptcy Petition Prepared Declaration, and Signature (Official	
Did you pa  ■ No □ Yes. I	ny or agree to pay som  Name of person		rney to help you fill out bankrupto	Attach Bankruptcy Petition Prepared Declaration, and Signature (Official	
Did you pa  No Yes. I	ny or agree to pay som  Name of person  alty of perjury, I declare			Attach Bankruptcy Petition Prepared Declaration, and Signature (Official state) s declaration and	
Did you pa  No Yes. I  Under penathat they ar	Name of person  lity of perjury, I declare true and correct.		mary and schedules filed with thi  X /s/ Shante M. Shea Shante M. Shearer	Attach Bankruptcy Petition Prepared Declaration, and Signature (Official state) s declaration and	
Did you pa  No Yes. I  Under penathat they ar  X /s/ Car Camer	Name of person  Ity of perjury, I declare true and correct.  meron A. Shearer		mary and schedules filed with thi	Attach Bankruptcy Petition Prepared Declaration, and Signature (Official state) s declaration and	

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Fill in t	his inform	nation to identify your	case:			
Debtor	1	Cameron A. She	arer			
Dobtos	2	First Name	Middle Name	Last Name		
Debtor (Spouse i		Shante M. Shear First Name	Middle Name	Last Name		
United	States Bar	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY		
Case n	umber					
(if known)					_	Check if this is an mended filing
Ott: •	ial Fai	waa 107				
		rm 107 of Financial <i>i</i>	Affairs for Individ	duals Filing for B	ankruptcy	04/22
					equally responsible for sup	
number	r (if knowr	n). Answer every ques	stion.			
Part 1:	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
I. Wł	nat is your	current marital statu	s?			
■□	Married Not mar	ried				
2. Du	ring the la	ast 3 vears. have vou	lived anywhere other than	where vou live now?		
_	J	,	,			
	No Yes. Lis	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
De	ebtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
_					<b>3</b>	,
_	No Yes. Ma	ke sure vou fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
		·	,			
Part 2	Explai	n the Sources of You	r Income			
Fill	in the tota	I amount of income you	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ery 1 to De	r year: cember 31, 2022 )	■ Wages, commissions, bonuses, tips	\$43,651.06	■ Wages, commissions, bonuses, tips	\$48,241.41
			☐ Operating a business		☐ Operating a business	

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Cameron A. Shearer Debtor 1 Shante M. Shearer Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$53,780.81 \$35,507.19 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2021) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year: \$36,112.00 \$44,989.00 Wages, commissions. Wages, commissions. (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 **Gross income from** Sources of income Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: Unemployment \$0.00 Disability \$8,445.00 (January 1 to December 31, 2022) For the calendar year before that: \$0.00 Disability \$7,801.00 (January 1 to December 31, 2021) For the calendar year: \$0.00 Disability \$2,904.00 (January 1 to December 31, 2020) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more? Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

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Debtor 1 Cameron A Shearer

Deb	tor 2	Shante M. Shearer		Cas	e number (if known	)	
	<i>Inside</i> of whi	n 1 year before you filed for bankrupters include your relatives; any general pach you are an officer, director, person in iness you operate as a sole proprietor. 1	artners; relatives of any gen control, or owner of 20% o	eral partners; partners r more of their voting	erships of which y g securities; and a	ou are a general any managing ag	partner; corporation ent, including one fo
	_	No /es. List all payments to an insider.					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
	inside	n 1 year before you filed for bankrupter? le payments on debts guaranteed or cos		ments or transfer a	ny property on	account of a del	ot that benefited an
	<b>I</b>	No					
	□ Y	es. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to Include credit	
Pari	: 1-	Identify Legal Actions, Repossession	ne and Foreclosures				
ıaı		identify Legal Actions, Repossession	is, and i oreclosures				
	List al modifi	n 1 year before you filed for bankrupt I such matters, including personal injury ications, and contract disputes.					
	_	No					
	Case	es. Fill in the details.	Nature of the case	Court or agency		Status of the	case
		e number	Nature of the case	Court or agency		Otatus of the	Case
		over Bank v. Cameron Shearer -DC-7433-22	Collection	Superior Court Jersey New Brunswic		■ Pending □ On appea □ Conclude	
		n 1 year before you filed for bankrupt call that apply and fill in the details below		erty repossessed, f	oreclosed, garni	shed, attached,	seized, or levied?
	_ `	No. Go to line 11. Yes. Fill in the information below.					
	Cred	itor Name and Address	Describe the Property		Date	•	Value of the
			Explain what happened	I			property
	accou	n 90 days before you filed for bankrup unts or refuse to make a payment bed No (es. Fill in the details.		luding a bank or fir	nancial institutio	n, set off any ar	nounts from your
	Cred	itor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		erty in the possess	ion of an assign	ee for the benef	it of creditors, a
		No					
	□ Y	/es					

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	btor 2 Shante M. Shearer	Case number	(if known)	
Pai	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankru	ptcy, did you give any gifts with a total value of more t	than \$600 per person?	?
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	ptcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or co	ntribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	,	Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	or gambling?	tcy or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	☐ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers			
	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pr	tcy, did you or anyone else acting on your behalf pay reparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Office of Michael P. Otto, LLC 1030 Stelton Road Suite 102 Piscataway, NJ 08854 motto@ottolawoffice.com	Attorney Fees	November 2022	\$2,000.00
17.		tcy, did you or anyone else acting on your behalf pay itors or to make payments to your creditors? you listed on line 16.	or transfer any propei	rty to anyone who
	■ No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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	otor 2 Shante M. Shearer			Case num	nber (if known)	
	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have already	business or financial at nade as security (such as	ffairs? s the granting of a se	-		
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and property transfe		paym	ribe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you			paiai	ii exonunge	
	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p		any property to a s	elf-settle	d trust or similar device	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	value of the prope	erty trans	sferred	Date Transfer was made
Part	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	sit Boxes, and Stor	rage Unit	ts	
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No  Yes. Fill in the details.  Name of Financial Institution and	or other financial acco	unts; certificates o	of deposi		
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	closed, sold, moved, or transferred		before closing or transfer
	Navy Federal Credit Union One Security Place Merrifield, VA 22119	XXXX-	■ Checking □ Savings □ Money Marke □ Brokerage □ Other	∍t	March 2022	\$500.00
	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, any	safe de	posit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had an Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	ur home within 1 y	ear befo	re you filed for bankrupt	tcy?
	No					
	Yes. Fill in the details.	NA/1 1 1		"	4	D
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number		Jescribe	the contents	Do you still have it?

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Debtor 1 Cameron A. Shearer
Debtor 2 Shante M. Shearer

Case number (if known)

Par	19: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust						
	No No									
	Yes. Fill in the details.	W(I ) (I	5 " "							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	Give Details About Environmental Inform	ation								
For	the purpose of Part 10, the following definitions	apply:								
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, groun	<del>-</del> •							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.								
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic s	substance,						
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they occurred.							
24.	Has any governmental unit notified you that yo	as any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law? Include settlements	and orders.						
	■ No									
	Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Par	111: Give Details About Your Business or Con	nnections to Any Business								
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?						
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time							
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)							
	☐ A partner in a partnership									
		tive of a corporation								
	☐ An owner of at least 5% of the voting or									

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	otor 1 Cameron A. Shearer Shante M. Shearer			Case nu	Imber (if known)
	■ No. None of the above applies. Go to F				
	Yes. Check all that apply above and fill	in the details be	elow for each business.		
	Business Name Address (Number, Street, City, State and ZIP Code)		ature of the business	Do	ployer Identification number not include Social Security number or ITIN. tes business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give	a financial statement to		
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			
Pai	t 12: Sign Below				
are with		false statement	concealing property, o	obtain	re under penalty of perjury that the answers ing money or property by fraud in connection r both.
/s/	Cameron A. Shearer	/s/ Sh	ante M. Shearer		
Ca	meron A. Shearer	Shant	e M. Shearer		
Sig	nature of Debtor 1	Signat	ure of Debtor 2		
Dat	e January 5, 2023	Date	January 5, 2023		
Did ■ N		ent of Financial <i>i</i>	Affairs for Individuals Fi	ling for	Bankruptcy (Official Form 107)?
Did ■ N	you pay or agree to pay someone who is no	t an attorney to I	nelp you fill out bankrup	tcy forr	ns?
	•	untou Potition Pro-	parar'a Nation Doglaration	ond C	ignatura (Official Form 110)
υΥ	es. Name of Person Attach the <i>Bankru</i>	picy Petition Pref	parei s Notice, Declaration	i, ana S	ignature (Official Form 119).

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Fill in this infor	mation to identify your ca	ıse:					
Debtor 1	Cameron A. Sheare						
Debtor 2	First Name  Shante M. Shearer	Middle Name		Last Name			
(Spouse if, filing)	First Name	Middle Name		Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF NE	EW JERSEY				
Case number							
(if known)						Check if this amended filing	
Official Fo							
<u>Stateme</u>	nt of Intentior	for Indiv	/iduals	Filing Under	<b>Chapter</b>	7	12/15
creditors have	lividual filing under chapt ve claims secured by you	property, or		ı if:			
You must file th	sed personal property and is form with the court with ever is earlier, unless the form	hin 30 days after	you file your				
•	eople are filing together i nd date the form.	n a joint case, bo	oth are equally	responsible for supply	ing correct infor	rmation. Both debto	rs must
	and accurate as possible our name and case numb		s needed, atta	ch a separate sheet to t	his form. On the	top of any addition	nal pages,
Part 1: List Y	our Creditors Who Have	Secured Claims					
	tors that you listed in Par	t 1 of Schedule D	): Creditors W	ho Have Claims Secure	d by Property (C	Official Form 106D), t	fill in the
information b	elow. reditor and the property tha	t is collateral	What do you	ou intend to do with the debt?	property that	Did you claim the as exempt on Sc	
	Navy Federal Credit Un	ion		er the property.		□ No	
name:			_	he property and redeem it		■ Yes	
Description of	f 2017 Volkswagen Pa			ne property and enter into nation Agreement.	a	_ 100	
property securing debt	Sedan 4D 96500 mil	es	☐ Retain th	ne property and [explain]:			
David Litativ	/!!!B	Na					
For any unexpir in the information	our Unexpired Personal I ded personal property leas on below. Do not list real de an unexpired personal	e that you listed estate leases. Ur	nexpired lease	s are leases that are stil	II in effect; the le	_eases (Official Forrease period has not	m 106G), fill yet ended.
Describe your	unexpired personal prope	rty leases			W	/ill the lease be assu	umed?
Lessor's name:	Hyundai Motor	Finance			С	] No	
						Yes	
Description of la	paged						
Description of le Property:	as <del>e</del> u						

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Dept		
Debt	or 2 Shante M. Shearer	Case number (if known)
Part :	Sign Below	
		ted my intention about any property of my estate that secures a debt and any personal
	rty that is subject to an unexpired lease. /s/ Cameron A. Shearer	X /s/ Shante M. Shearer
X _	rty that is subject to an unexpired lease.	
Χ _	rty that is subject to an unexpired lease. /s/ Cameron A. Shearer	X /s/ Shante M. Shearer

Fill in this inf	and the state of t								
	ormation to identify your case:				eck one b 2A-1Supp		lirected	l in this form and	in Form
Debtor 1	Cameron A. Shearer								
Debtor 2 (Spouse, if filing)	Shante M. Shearer				1. The	re is no pres	umptic	n of abuse	
United States	s Bankruptcy Court for the: District of New Jers	sey		'	app	olies will be n	nade u	rmine if a presum nder <i>Chapter 7 N</i> orm 122A-2).	•
Case numbe	er			,		`		,	,
(II KIIOWII)								not apply now bed but it could app	
					☐ Chec	k if this is a	n ame	ended filing	
Official	Form 122A - 1								
	r 7 Statement of Your Cur	rent N	/lor	nthly Inc	ome				12/19
attach a separ case number ( qualifying mili	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to w if known). If you believe that you are exempted fror tary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the ad n a presum	ditior ption	nal information a of abuse becau	applies. O se you do	n the top of a not have pri	ny addi narily d	tional pages, write consumer debts or	your name and because of
1. What is	s your marital and filing status? Check one on	ly.							
☐ Not	married. Fill out Column A, lines 2-11.								
■ Marı	ried and your spouse is filing with you. Fill ou	t both Colu	umns	A and B, lines	2-11.				
☐ Marı	ried and your spouse is NOT filing with you. '	You and y	our s	spouse are:					
Li	iving in the same household and are not lega	Ily separa	ted.	Fill out both Co	lumns A a	and B, lines 2	2-11.		
р	iving separately or are legally separated. Fill of the control of perjury that you and your spouse are leading apart for reasons that do not include evading	egally sepa	rated	d under nonban	kruptcy la	aw that appli	es or th	•	
101(10A). F the 6 month	average monthly income that you received from all start or example, if you are filing on September 15, the 6-mins, add the income for all 6 months and divide the total with the same rental property, put the income from that property.	onth period by 6. Fill in t	would he re	be March 1 throus bult. Do not include	ugh Augus de any inco	t 31. If the amo	ount of your	our monthly income once. For example	e varied during e, if both
.,	7/1			<b>, ,</b> ,	Column Debtor	A	Colu Deb	ımn B tor 2 or -filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	and comm	issic	ons (before all	\$	664.03	\$	5,480.07	
	y and maintenance payments. Do not include a B is filled in.	payments	from	a spouse if	\$	0.00	\$	0.00	
of you from an and roo	ounts from any source which are regularly pa or your dependents, including child support. I unmarried partner, members of your household Immates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include re , your depe	gular ende	contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inc	ome from operating a business, profession,	or farm							
				otor 1					
	eceipts (before all deductions)	· ·	.00						
	y and necessary operating expenses		.00	Camerbass	Φ	0.00	•	0.00	
	nthly income from a business, profession, or farr	n\$	.00	Copy here ->	Ф	0.00	\$	0.00	
6. Net inc	ome from rental and other real property		Del	stor 1					
_		e ^		otor 1					
	eceipts (before all deductions)	· <u> </u>	.00						
	y and necessary operating expenses	·	.00	Camulhana	Ф	0.00	œ	0.00	
Net mo	nthly income from rental or other real property	\$ 0	.00	Copy here ->	Ф	0.00	\$	0.00	

7. Interest, dividends, and royalties

0.00

0.00

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Debtor:	Shante M. Shearer			Case nu	umber (if known)			
				Columi Debtor		Column B Debtor 2 o		
8. <b>l</b>	Inemployment compensation			\$	1,100.67	\$	0.00	
	o not enter the amount if you contend that the amour ne Social Security Act. Instead, list it here:	nt received was a benefi	t under					
	For you \$	0.0	00					
	For your spouse	0.0						
t r l c	ension or retirement income. Do not include any are enefit under the Social Security Act. Also, except as so tinclude any compensation, pension, pay, annuity, of Inited States Government in connection with a disability of death of a member of the uniformed service ay paid under chapter 61 of title 10, then include that oes not exceed the amount of retired pay to which yo retired under any provision of title 10 other than chap	stated in the next senter or allowance paid by the ity, combat-related injur- ces. If you received any pay only to the extent the u would otherwise be en	nce, do e y or retired nat it ntitled	\$	0.00	\$_	0.00	
] ; ()	ncome from all other sources not listed above. Sponot include any benefits received under the Social seceived as a victim of a war crime, a crime against hu omestic terrorism; or compensation pension, pay, and inited States Government in connection with a disability, or death of a member of the uniformed service ources on a separate page and put the total below	Security Act; payments manity, or international nuity, or allowance paic ity, combat-related injur	or I by the y or					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
Part 2	•	to You					Total current income	nonthly
	calculate your current monthly income for the year	•		,	Conviling 11	horo	¢ 7.04	4 77
·	2a. Copy your total current monthly income from line	11			Copy line 11	nere=>	\$7,24	4.77
	Multiply by 12 (the number of months in a year)						<b>x</b> 12	
	2b. The result is your annual income for this part of th	ne form				12	b. <b>86,93</b>	7.24
13. <b>(</b>	Calculate the median family income that applies to	you. Follow these step	s:					
F	ill in the state in which you live.	NJ						
F	ill in the number of people in your household.	4						
7	ill in the median family income for your state and size of find a list of applicable median income amounts, goor this form. This list may also be available at the bank	online using the link sp	ecified ir	n the se	parate instruc	tions 13	. \$143,98	7.00
14. <b>i</b>	low do the lines compare?							
,	4a. Line 12b is less than or equal to line 13. C Go to Part 3. Do NOT fill out or file Official		eck box '	1, There	e is no presun	nption of abu	se.	
,	4b.  Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A–2.	of page 1, check box 2,	The pres	sumptio	n of abuse is	determined l	by Form 122A-2.	
art 3								
	By signing here, I declare under penalty of perjury	that the information or	this stat	tement a	and in any att	achments is	true and correct.	
	X /s/ Cameron A. Shearer	¥ /	s/ Shan	te M. S	Shearer			
	Cameron A. Shearer		hante I					

Cameron A. Shearer

Debtor 1

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Deptor 1	Cameron A. Shearer Shante M. Shearer		Case number (if known)	
	Signature of Debtor 1		Signature of Debtor 2	
Date	January 5, 2023	Date	January 5, 2023	
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this f	orm.		

Debtor 1 Cameron A. Shearer Shante M. Shearer

Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2022 to 12/31/2022.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Federal Express

Income by Month:

6 Months Ago:	07/2022	\$0.00
5 Months Ago:	08/2022	\$0.00
4 Months Ago:	09/2022	\$0.00
3 Months Ago:	10/2022	\$833.42
2 Months Ago:	11/2022	\$481.61
Last Month:	12/2022	\$206.07
	Average per month:	\$253.52

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **USPS** 

Income by Month:

6 Months Ago:	07/2022	\$0.00
5 Months Ago:	08/2022	\$0.00
4 Months Ago:	09/2022	\$0.00
3 Months Ago:	10/2022	\$0.00
2 Months Ago:	11/2022	\$0.00
Last Month:	12/2022	\$2,463.03
	Average per month:	\$410.51

#### Line 8 - Unemployment compensation (included in CMI)

Source of Income: **New Jersey** 

Income by Month:

6 Months Ago:	07/2022	\$0.00
5 Months Ago:	08/2022	\$0.00
4 Months Ago:	09/2022	\$0.00
3 Months Ago:	10/2022	\$2,032.00
2 Months Ago:	11/2022	\$2,540.00
Last Month:	12/2022	\$2,032.00
	Average per month:	\$1,100.67

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Debtor 1 Debtor 2 Cameron A. Shearer Shante M. Shearer

Case number (if known)

#### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 07/01/2022 to 12/31/2022.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment** 

Income by Month:

6 Months Ago:	07/2022	\$4,867.82
5 Months Ago:	08/2022	\$4,867.82
4 Months Ago:	09/2022	\$7,301.73
3 Months Ago:	10/2022	\$4,867.82
2 Months Ago:	11/2022	\$5,945.81
Last Month:	12/2022	\$5,029.40
	Average per month:	\$5,480.07

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
<u>+</u> \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 23-10103-KCF Doc 1 Filed 01/05/23 Entered 01/05/23 15:17:29 Desc Main Document Page 60 of 66

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**District of New Jersey

In 1	re	Cameron A. She Shante M. Shea			Case	No.		
	=	<u> </u>		Debtor(s)	Chap	ter	7	
		DISC	CLOSURE OF COM	IPENSATION OF AT	TTORNEY FOR	l DI	EBTOR(S)	
1.	con	npensation paid to n	ne within one year before th	. 2016(b), I certify that I am the ne filing of the petition in bank ation of or in connection with t	ruptcy, or agreed to be	paid	to me, for servic	
		For legal services,	, I have agreed to accept		\$ <u></u>		2,000.00	
				eived			2,000.00	
		Balance Due					0.00	
2.	\$		iling fee has been paid.					
3.	The	e source of the comp	pensation paid to me was:					
		Debtor	☐ Other (specify):					
4.	The	e source of compens	sation to be paid to me is:					
		_	☐ Other (specify):					
5.		I have not agreed to	o share the above-disclosed	compensation with any other J	person unless they are	mem	bers and associat	tes of my law firm.
				npensation with a person or pe the names of the people sharing				my law firm. A
6.	In	return for the above	e-disclosed fee, I have agree	d to render legal service for all	aspects of the bankrup	otcy (	case, including:	
	a.	[Other provisions as	s needed]					
7.	Ву	Representation reaffirmation	tion of the debtors in ar in agreements and appl for avoidance of liens o	sed fee does not include the fol ny dischargeability actions ications as needed; prepa on household goods; relie	s, judicial lien avoid ration and filing of	mot	ions pursuant	to 11 USC
				CERTIFICATION				
this		ertify that the forego kruptcy proceeding.		t of any agreement or arrangem	ent for payment to me	for r	representation of	the debtor(s) in
_	Jan	uary 5, 2023		/s/ Michael				
	Date	,		Michael P. ( Signature of A Law Office 1030 Stelto	Attorney of Michael P. Otto,	LLC	:	
				Suite 102				
				Piscataway 732-819-700	<sup>-</sup> , NJ 08854 00   Fax: 732-819-75	75		
				motto@otto	olawoffice.com			
				Name of law	firm			

### United States Bankruptcy Court District of New Jersey

In re	Cameron A. Shearer Shante M. Shearer		Case No.	
		Debtor(s)	Chapter	7
Γhe abo		FICATION OF CREDITOR		of their knowledge.
Date:	January 5, 2023	/s/ Cameron A. Shearer Cameron A. Shearer		
		Signature of Debtor		
Date:	January 5, 2023	/s/ Shante M. Shearer		
		Shante M. Shearer		

Signature of Debtor

Affirm 30 Isbella Street, Flr 4 Pittsburgh, PA 15212

Afterpay US, Inc. POB 328 San Francisco, CA 94104

AM/PM Urgent & Primary Care 19 S. Washington Ave. Bergenfield, NJ 07621

American Eagle POB 530942 Atlanta, GA 30353

American Express POB 297871 Fort Lauderdale, FL 33329

Apple Card - GS Bank USA POB 7247 Lockbox 6112 Philadelphia, PA 19170

Bank of America POB 15284 Wilmington, DE 19850

Capital One POB 30285 Salt Lake City, UT 84130

Comenity Bank POB 183003 Columbus, OH 43218

Core, Spine & Wellness 180 Tices Lane, Ste 105 East Brunswick, NJ 08816

Credit Acceptance Corp. POB 513 Southfield, MI 48037

Credit One Bank POB 98875 Las Vegas, NV 89193

Cross River Bank 268 Bush Street, #4411 San Francisco, CA 94104

Dept. of Education/Nelnet 121 S 13th Street Lincoln, NE 68508

Discover POB 30939 Salt Lake City, UT 84130

Dr. Mahmud Ibrahim 555 NJ 18 East Brunswick, NJ 08816

Envision Physician Services POB 8710 Pompano Beach, FL 33075

Envision Physician Services POB 37794 Philadelphia, PA 19101

GEICO Attn: Region 8 Policy POB 9506 Fredericksburg, VA 22403

Hyundai Motor Finance PO Box 660891 Dallas, TX 75266

Kashable, LLC 489 5th Ave. Floor 18 New York, NY 10017

Kohls POB 60043 City of Industry, CA 91716 LVNV Funding POB 1269 Greenville, SC 29602

Medemerge POB 890 Dunellen, NJ 08812

MOHELA/Dept. of Education 633 Spirit Drive Chesterfield, MO 63005

Navient POB 9635 Wilkes Barre, PA 18773-9635

Navy Federal Credit Union POB 3100 Merrifield, VA 22119-3100

Navy Federal Credit Union 820 Follin Lane SE Vienna, VA 22180

NJ Urology POB 95000 Philadelphia, PA 19195

Nordstrom POB 6555 Englewood, CO 80155

Old Navy POB 8801 Wilmington, DE 19899

One United Bank 3683 Crenshaw Blvd Los Angeles, CA 90016

Pressler, Felt & Warshaw, LLP 7 Entin Road Parsippany, NJ 07054

Remex Inc 307 Wall Street Princeton, NJ 08540-1515

Same Day Surgery Center of Cent. Jersey 225 May Street Unit C Edison, NJ 08837

Southern Bank Emergency Physicians 366 George Street New Brunswick, NJ 08901

St. Peters University Hospital 254 Easton Ave.
New Brunswick, NJ 08901

SYNCB/Amazon POB 960013 Orlando, FL 32896

SYNCB/Care Credit POB 960061 Orlando, FL 32896

SYNCB/Paypal Credit POB 965005 Orlando, FL 32896

Tiona McNair 25 Maple Ave., Apt. B Irvington, NJ 07111

Ultra Beauty 1000 Remington Blvd, Suite 120 Bolingbrook, IL 60440

Unity Visa POB 4521 Carol Stream, IL 60197

University Radiology Group, PC 483 Cranbury Road East East Brunswick, NJ 08816

Upstart Network 2950 S. Delaware Street Suite 3 San Mateo, CA 94403